PTO/SB/01 (10-00)

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DEC	LARATION		Attorney Do	cket Number	DEP673-CIP
	AND OF ATTORNEY		First Named	Inventor	WACK, MICHAEL A.
	ITY OR DESIGN			COMPLE	TE IF KNOWN
•	APPLICATION CFR 1.63)	į	Application I	Number	
Declaration Submitted with Initial Filing	OR Initial Filing (Su	ırcharge	Filing Date		
·	(37 CFR 1.16(e)) required)	Group Art U	nit	
	·		Examiner Na	ame	
As a below named invento	r, I hereby declare tha	t:	1.2		
My residence, mailing addre I believe I am the original, fir plural names are listed belov entitled:	st and sole inventor (if o	only one nam	e is listed belo	ow) or an origin	
	DUAL LOCKING	PLATE AND Title of the In		D METHOD	
the specification of which					
is attached hereto				*	
OR					1
was filed on (MM/DD/Y) and was amended on (f		States Applic	ation Number	or PCT Interna	tional Application Number
I hereby state that I have rev amended by any amendmen			of the above i	dentified specif	ication, including the claims, as
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application	Country		Filing Date D/YYYY)	Priority Not Claime	Certified Copy d Attached?
Number(s)		· .			YES NO
,					
Additional foreign applic	l cation numbers are liste	l d on a suppl	emental priorit	ty data sheet P	TO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application							
I hereby claim the benefit under 35 U.S.C	2. 119(e) of any United States provisional a	application(s) listed below.					
Application Number(s)							
60/285,462	April 20, 2001 Additional provisional application numbers are listed on a supplemental priority data sheep TO/SB/02B attached hereto.						
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:							
Application Serial No.	Filing Date	Status					
10/100,387	March 18, 2002	Pending					
I hereby appoint:							
Practitioners at Customer Number	000027777	Place Customer Number Bar Code Label Here					
AND		_					
Practitioner(s) named below: Name	Registration Number						
as my/our attomey(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.							
Address all telephone calls to John Wagley at telephone number (219) 372-7332.							
Customer Number Direct all correspondence to:							
Name:							
Address:							
Address:							
City:	State:	ZIP					
Country	Telephone:	Fax:					

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I hereby declare that all statements made information and belief are believed to be t that willful false statements and the like so U.S.C. 1001 and that such willful false states issued thereon.	rue; and further o made are pur	r that the ishable	ese sta by fine	tements were or imprisonme	made with the knowledge ent, or both, under 18
NAME OF SOLE OR FIRST INVENTOR:		etition has	been fil	ed for this unsign	ed inventor
Given Name (first and middle [if any]) MICHAEL A.		Family or Surn		WACK	
Inventor's Signature				Date	
Residence: City WARSAW	State IN		Count	ry US	CitizenshipUS
Mailing Address 1604 S. WOODFIELD TRAIL					T
City WARSAW	State IN		ZIP 4	6580	Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR SECOND INVENTOR:		Julion nas	00011111	ed for this unsign	ed inventor
Given Name (first and middle [if any]) Pamela C.		Family or Surn		Guzman	
Inventor's Signature	_			Date	
Residence: City Fort Wayne	State IN		Count	ry US	CitizenshipUS
Mailing Address 6418 Beaver Creek Ct.	.,				
City Fort Wayne	State IN		ZIP 4		Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR THIRD INVENTOR:	□ А ре	tition has	been fil	ed for this unsigne	ed inventor
Given Name (first and middle [if any]) Dennis A.		Family I		Stoller	
Inventor's Signature	<u> </u>			Date 7/	25/63
Residence: City Fort Wayne	State IN		Count	ry US	CitizenshipUS
Mailing Address11025 Wheelock Road					
City Fort Wayne	State IN		ZIP 4	6835	Country US

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF FOURTH INVENTOR:	☐ A pe	etition has	been fil	ed for this unsigne	ed inventor
Given Name (first and middle [if any]) Christopher K.		Family N		Bremer	
Inventor's Christians Sterm	u.C			Date 7	125/03
Residence: City Warsaw	State IN		Count	ry US	Citizenship US
Mailing Address 294 North County Road 175 E	ast			·	-
City Warsaw	State IN	٠,	ZIP 4		Country US
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF FIFTH INVENTOR:	☐ A pe	etition has	been file	ed for this unsigne	ed inventor
Given Name (first and middle [if any]) Mark A		Family N		Fenton	
Inventor's Mark a 2	Inton			Date 7/2	5/03
Residence: City North Manchester	State IN		Count	ry US	Citizenship US
Mailing Address 621 East. 5th Street	•				
City North Manchester	State IN		ZIP 4	6962	Country US

I hereby declare that all statements me information and belief are believed to that willful false statements and the lill U.S.C. 1001 and that such willful false issued thereon.	be true; and further ke so made are puni	that these statements v shable by fine or impris	were made with the knowledge conment, or both, under 18		
NAME OF SIXTH INVENTOR:	☐ A pe	lition has been filed for this u	unsigned inventor		
Given Name (first and middle [if any]) LAWRENCE B.		Family Name BONE			
Inventor's Signature	,	Date			
Residence: City BUFFALO	State NY	Country US	Citizenship US		
Mailing Address UNIVERSITY ORTHOPAEL	DIC SERVICES PC, ERI	COUNTY MEDICAL CENT	FER, 462 GRIDER STREET		
City BUFFALO	State NY	ZIP 14215	Country US		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SEVENTH INVENTOR:	NAME OF SEVENTH INVENTOR: A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any]) ROY W. Family Name or Surname SANDERS					
Inventor's Signature	enel	Date	7/28/03		
Residence: CityTAMPA	State FL	Country US	Citizenship US	_	
Mailing Address Florida Orthopaedic Institute	e, 4 Columbia Drive, Suit	e 710			
City Tamap	State FL	ZIP 33606	Country US		

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entitled:

OR

PTO/SB/01 (10-00) Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. **DECLARATION** DEP673-CIP Attorney Docket Number AND **POWER OF ATTORNEY** WACK, MICHAEL A. First Named Inventor FOR UTILITY OR DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** □ Declaration Submitted with □ Declaration Submitted after Filing Date Initial Filing OR Initial Filing (Surcharge (37 CFR 1.16(e)) required) Group Art Unit **Examiner Name** As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention DUAL LOCKING PLATE AND ASSOCIATED METHOD (Title of the Invention) the specification of which is attached hereto was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or

inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certifie Attac	hed?
Number(s)			ļ	YES	NO

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application								
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s)	Filing Date (MM/DD/YYYY)							
60/285,462	numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:								
Application Serial No.	Filing Date	Status						
10/100,387	March 18, 2002	Pending						
I hereby appoint:								
Practitioners at Customer Number AND	000027777 →	Place Customer Number Bar Code Label Here						
Practitioner(s) named below: Name Registration Number								
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.								
Address all telephone calls to John Wagley at telephone number (219) 372-7332.								
Customer Number Direct all correspondence to:								
Name:								
Address:								
Address:								
City:	State:	ZIP						
Country	Country Telephone: Fax:							

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventor Given Name Family Name (first and middle [if any]) MICHAEL A. or Surname **WACK** Inventor's Signature Date Residence: City WARSAW State IN Country US Citizenship US Mailing Address 1604 S. WOODFIELD TRAIL WARSAW State IN ZIP 46580 **Country US** I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR SECOND A petition has been filed for this unsigned inventor INVENTOR: Given Name Family Name (first and middle [if any]) Pamela C. or Surname Guzman Inventor's Signature Date Residence: City Fort Wayne State IN Country US Citizenship US Mailing Address 6418 Beaver Creek Ct. ZIP 46814 **Country US** State IN I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR THIRD INVENTOR: A petition has been filed for this unsigned inventor Given Name Family Name (first and middle [if any]) Dennis A or Surname Stoller Inventor's Signature Date Residence: City Fort Wayne State IN **Citizenship US** Country US Mailing Address11025 Wheelock Road City Fort Wayne State IN ZIP 46835 Country US

Residence: City Warsaw State IN Country US Citizenship US Mailing Address 294 North County Road 175 East City Warsaw State IN ZIP 46582 Country US I hereby declare that all statements made herein of my own knowledge are true and that all statements made information and belief are believed to be true; and further that these statements were made with the knowled that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. NAME OF FIFTH INVENTOR: A petition has been filed for this unsigned inventor Family Name			etition has been filed for this uns	igned inventor		
Residence: City Warsaw State IN Country US Citizenship US Mailing Address 294 North County Road 175 East City Warsaw State IN ZIP 46582 Country US I hereby declare that all statements made herein of my own knowledge are true and that all statements made information and belief are believed to be true; and further that these statements were made with the knowled that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. NAME OF FIFTH INVENTOR: A petition has been filed for this unsigned inventor Family Name						
Mailing Address 294 North County Road 175 East City Warsaw State IN ZIP 46582 Country US I hereby declare that all statements made herein of my own knowledge are true and that all statements made information and belief are believed to be true; and further that these statements were made with the knowled that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. NAME OF FIFTH INVENTOR: A petition has been filed for this unsigned inventor Family Name		nel	Date	7/25/03		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made information and belief are believed to be true; and further that these statements were made with the knowled that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. NAME OF FIFTH INVENTOR: A petition has been filed for this unsigned inventor Family Name	idence: City Warsaw	State IN	Country US	Citizenship US		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made information and belief are believed to be true; and further that these statements were made with the knowled that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any pater issued thereon. NAME OF FIFTH INVENTOR: A petition has been filed for this unsigned inventor Family Name	ling Address 294 North County Road	175 East				
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Given Name Family Name	ormation and belief are believed t willful false statements and the S.C. 1001 and that such willful fa	to be true; and furthe like so made are pur	r that these statements we iishable by fine or imprison	re made with the knowledge ment, or both, under 18		
The state of the s	ME OF FIFTH INVENTOR:	A p	etition has been filed for this uns	igned inventor		
Inventor's Nout a Linton Date 7/25/03		Tenton	Date 7	125/03		
Residence: City North Manchester State IN Country US Citizenship US	sidence: City North Manchester	State IN	Country US	Citizenship US		
	ling Address 621 East. 5th Street North Manchester	State IN	ZIP 46962	Country US		

I hereby declare that all statements n information and belief are believed to that willful false statements and the li U.S.C. 1001 and that such willful false issued thereon.	be true; and further ke so made are pun	r that these st ishable by fin	atements were	made with the knowledge ent, or both, under 18	
NAME OF SIXTH INVENTOR:	A pe	etition has been	filed for this unsign	ed inventor	
Given Name (first and middle [if any]) LAWRENCE B. Family Name or Surname BONE					
Inventor's Signature			Date		
Residence: City BUFFALO	State NY	Cour	ntry US	Citizenship US	
Mailing Address UNIVERSITY ORTHOPAE	DIC SERVICES PC, ER	IE COUNTY ME	DICAL CENTER, 4	62 GRIDER STREET	
City BUFFALO	State NY	ZIP	14215	Country US	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SEVENTH INVENTOR:	☐ A pe	etition has been	filed for this unsign	ed inventor	
Given Name (first and middle [if any]) ROY W. Family Name or Surname SANDERS					
Inventor's Signature			Date		
Residence: CityTAMPA	State FL	Cour	ntry US	Citizenship US	
Mailing Address Florida Orthopaedic Institut	e, 4 Columbia Drive, Su	ite 710			
City Tamap	State FL		33606	Country US	

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	Please type a plus sign (+) inside this box (+) Approved for use (through 10/31/2002, OMB 06514 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMME Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control num						1032 RCE
DECL	DEP673	-CIP					
	AND POWER OF ATTORNEY			Inventor	WACK, I	MICHAEL A.	
	TY OR DESIGN			COMPLET	E IF KNC)WN	
	APPLICATION CFR 1.63)		Application N	lumber			
Declaration Submitted with Initial Filing	OR Initial Filing (Sur	rcharge	Filing Date				
	(37 CFR 1.16(e)) required)			nit			_
			Examiner Na	me			
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
	DUAL LOCKING I	PLATE AND A		D METHOD			i
the specification of which							
is attached hereto		•					
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)]	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						as	
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						ent	
Prior Foreign Application Number(s)	Country	Foreign Fi (MM/DD		Priority Not Claims	od	Certified Copy Attached? YES NO)
·							1
Additional foreign applic	ation numbers are liste	d on a supple	mental priorit	ty data sheet F	TO/SB/02	B attached hereto:	:

DECLARATION - Utility or Design Patent Ap_lication							
I hereby claim the benefit under 35 U.S.C	. 119(e) of any United States provisional a	pplication(s) listed below.					
Application Number(s)	Filing Date (MM/DD/YYYY)						
60/285,462	60/285,462 April 20, 2001						
PTO/SB/02B attached hereto. I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:							
Application Serial No.	Filing Date	Status					
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I hereby appoint:	<u> </u>						
Practitioners at Customer Number	Place Customer Number Bar Code Label Here						
AND							
Practitioner(s) named below: Name Registration Number							
as my/our attomey(s) or agent(s) to prose States Patent and Trademark Office cont	ecute the application identified above, and nected therewith.	to transact all business in the United					
Address all telephone calls to John Wagley at telephone number (219) 372-7332.							
Customer Number Direct all correspondence to:							
Name:							
Address:							
Address:							
City:	State:	ZIP					
Country	Yelephone:	Fax:					

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NAME OF SOLE OR FIRST INVENTOR:	□Аре	tition has been fil	ed for this unsigne	d inventor
Given Name (first and middle [if any]) MICHAEL A.	,	Family Name or Surname	WACK	
Inventor's Signature Manade		·	Date 7	-27-03
Residence: City WARSAW	State IN	Count	ry US	CitizenshipUS
Mailing Address 1604 S. WOODFIELD TRAIL	·			
City WARSAW	State IN	ZIP 4	6580	Country US
I hereby declare that all statements mainformation and belief are believed to that willful false statements and the like U.S.C. 1001 and that such willful false issued thereon.	be true; and further so made are pun	that these sta ishable by fine	itements were i or imprisonme	made with the knowledge ent, or both, under 18
NAME OF SOLE OR SECOND INVENTOR:	☐ A pe	tition has been fi	led for this unsigne	ed inventor
Given Name (first and middle [if any]) Pamela C.		Family Name or Surname	Guzman	
Inventor's Signature			Date	
Residence: City Fort Wayne	State IN	Coun	try US	CitizenshipUS
Mailing Address 6418 Beaver Creek Ct.	· · · · · · · · · · · · · · · · · · ·			
City Fort Wayne	State IN	ZIP 4		Country US
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NAME OF SOLE OR THIRD INVENTOR:	☐ A po	etition has been fi	led for this unsign	ed inventor
Given Name (first and middle [if any]) Dennis A.		Family Name or Surname	Stoller	
Inventor's Dun A- S	th		Date 7/	25/03
Residence: City Fort Wayne	State IN	Coun	try US	Citizenship US
Mailing Address11025 Wheelock Road				
City Fort Wayne	State IN	ZIP 4	46835	Country US

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NAME OF FOURTH INVENTOR:	☐ A pe	tition has been file	d for this unsi	gned inventor
Given Name (first and middle [if any]) Christopher K.		Family Name or Surname	Bremer	
Inventor's Charles Signature	rec		Date	7/25/03
Residence: City Warsaw	State IN	Countr	y US	Citizenship US
Mailing Address 294 North County Road 175	East			
City Warsaw	State IN	ZIP 4	5582	Country US
I hereby declare that all statements me information and belief are believed to that willful false statements and the lik U.S.C. 1001 and that such willful false issued thereon.	be true; and further te so made are pun	that these stati	ements wer or imprison	re made with the knowledge ment, or both, under 18
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Given Name (first and middle [if any]) Mark A		Family Name or Surname	Fenton	
Inventor's Mark a	Tenton		Date 7	125/03
Residence: City North Manchester	State IN	Count	ry US	Citizenship US
Mailing Address 621 East. 5th Street				
City North Manchester	State IN	ZIP 4	6962	Country US

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Given Name (first and middle [if any]) LAWRENCE B.		Family Name or Surname	BONE	·
inventor's Signature			Date	
Residence: City BUFFALO	State NY	Coun	try US	Citizenship US
Mailing Address UNIVERSITY ORTHOPAET	DIC SERVICES PC, ER	IE COUNTY MED	DICAL CENTER, 4	62 GRIDER STREET
City BUFFALO	State NY	ZIP	14215	Country US
I hereby declare that all statements m information and belief are believed to that witiful false statements and the lift U.S.C. 1001 and that such willful false issued thereon.	be true; and further te so made are pun	that these statishable by fine	atements were e or imprisonm	made with the knowledge ent, or both, under 18
NAME OF SEVENTH INVENTOR:	□Аре	etition has been f	iled for this unsign	ed Inventor
Given Name (first and middle [if any]) ROY W.		Family Name or Surname	SANDERS	
inventor's Signature			Date	
Residence: City TAMPA	State FL	Coun	itry US	CitizenshipUS
Mailing Address Florida Orthopaedic Institut	e, 4 Columbia Drive, Su	ite 710		
City Tamap	State FL		33606	Country US

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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DEC	LARATION		Attorney Doo	cket Number	DEP673-CIP
	AND OF ATTORNEY		First Named	Inventor	WACK, MICHAEL A.
	ITY OR DESIGN			COMPLE	TE IF KNOWN
	APPLICATION CFR 1.63)		Application 1	Number	
Declaration Submitted with Initial Filing	OR Initial Filing (Su	rcharge	Filing Date		
	(37 CFR 1.16(e)) required)	Group Art U	nit	
	•		Examiner Na	ame	
As a below named invento	r, I hereby declare tha	t:			
My residence, mailing addrest believe I am the original, first plural names are listed below entitled:	st and sole inventor (if o	nly one nam	e is listed belo	ow) or an origin	
	DUAL LOCKING	PLATE AND Title of the Ir		D METHOD	
the specification of which					
is attached hereto					
OR					:
was filed on (MM/DD/Y) and was amended on (I		States Applica	ation Number	or PCT Interna	tional Application Number
I hereby state that I have rev amended by any amendmen			of the above id	dentified specif	ication, including the claims, as
I acknowledge the duty to dis continuation-in-part application and the national or PCT inter	ons, material information	n which beca	me available	between the fili	37 CFR 1.56, including for ng date of the prior application
or inventor's certificate, or an priority is claimed.	 a) of any PCT internation ted below and have also 	nal application identified be belication havi	on which design elow, by check ng a filing date	gnated at least king the box, ar	one country other than the ny foreign application for patent
Prior Foreign	0		Filing Date	Priority	Certified Copy
Application Number(s)	Country	(MM/DI	DMYYY)	Not Claime	d Attached? YES NO
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t.					
Additional foreign applic	cation numbers are liste	d on a supple	emental priorit	y data sheet P	TO/SB/02B attached hereto:

DECLAF	RATION - Utility or Design Patent Ap	plication
I hereby claim the benefit under 35 U.S.C	2. 119(e) of any United States provisional a	application(s) listed below.
Application Number(s)	Filing Date (MM/DD/YYYY)	
60/285,462	April 20, 2001	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
as the subject matter of each of the claims provided by the first paragraph of Title 35, defined in Title 37, Code of Federal Regula	nited States Code, § 120 of any United State of this application is not disclosed in the prio United States Code, § 112, I acknowledge thations, § 1.56(a) which occurred between the	or United States application in the manner are duty to disclose material information as
national or PCT international filing date of t		Ctatus
Application Serial No.	Filing Date	Status
10/100,387	March 18, 2002	Pending
f hereby appoint:		
Practitioners at Customer Number AND:	000027777	Place Customer Number Bar Code Label Here
Practitioner(s) named below: Name	Registration Number	
as my/our attorney(s) or agent(s) to prose States Patent and Trademark Office conr	ecute the application identified above, and nected therewith.	to transact all business in the United
Address all telephone calls to John Wagley at te	lephone number (219) 372-7332.	
	mer Number r Code Label 000027777 OR	☐ Correspondence address below
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) MICHAEL A. or Surname WACK Inventor's Signature Date Residence: City WARSAW State IN Country US Citizenship US Mailing Address 1604 S. WOODFIELD TRAIL City WARSAW ZIP 46580 State IN Country US I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR SECOND A petition has been filed for this unsigned inventor INVENTOR: Given Name **Family Name** (first and middle [if any]) Pamela C. or Surname Guzman Inventor's Signature Date Residence: City Fort Wayne State IN Country US Citizenship US Mailing Address 6418 Beaver Creek Ct. State IN ZIP 46814 **Country US** I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR THIRD INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) Dennis A or Surname Stoller Inventor's Signature Date Country US Residence: City Fort Wayne State IN CitizenshipUS Mailing Address11025 Wheelock Road State IN ZIP 46835 City Fort Wayne Country US

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF FOURTH INVENTOR: A petition has been filed for this unsigned inventor Given Name **Family Name** (first and middle [if any]) Christopher K. or Surname Bremer Inventor's フロラーロマ Signature Date State IN Citizenship US Residence: City Warsaw **Country US** Mailing Address 294 North County Road 175 East State IN ZIP 46582 Country US Warsaw I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF FIFTH INVENTOR: ☐ A petition has been filed for this unsigned inventor. **Family Name** Given Name (first and middle [if any]) Mark A or Surname Fenton 03 Signature Residence: City North Manchester State IN Country US Citizenship US Mailing Address 621 East. 5th Street City State IN ZIP 46962 Country US North Manchester

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NAME OF SIXTH INVENTOR:	A pe	etition has been fi	led for this un	signed inventor
Given Name (first and middle [if any]) LAWRENCE B	3.	Family Name or Surname	BONE	
Inventor's Signature Danie	ing Br	رو	Date	.29 63
Residence: City BUFFALO	State NY	Coun	try US	Citizenship US
Mailing Address UNIVERSITY ORTHOPA	AEDIC SERVICES PC, ER	E COUNTY MED	DICAL CENTE	R, 462 GRIDER STREET
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I hereby declare that all statements information and belief are believed that willful false statements and the U.S.C. 1001 and that such willful falses thereon	to be true; and further e like so made are pun	that these sta	are true an itements we or impriso	ere made with the knowled nment, or both, under 18
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